PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 29, 1999

Application or Docket Number

666213

CLAIMS AS FILED - PART I							L ENTITY		OTHER	
FOR			(Column 1) BER FILED		(Column 2) NUMBER EXTRA		TYPE		SMALL ENTITY	
		140101		Nowbert		RATE		1	RATE	FEE
ВА	SIC FEE					4.	345.00	OR		690.00
TO	TAL CLAIMS		for minus 2			X\$ 9=	=	OR	X\$18=	954°°
INDEPENDENT CLAIMS minus 3			3 = 1 8		X39=		OR	X78=	624°°	
MU	LTIPLE DEPEN	DENT CLAIM	PRESENT	+130=	_	OR	+260=			
* If the difference in column 1 is less than zero, enter "0" in column 2								OR	TOTAL	2268°°
	CI	LAIMS AS	AMENDED	TOTA :		1 01,	OTHER			
	(Column 1) (Column 2) (Column 3)						L ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMEN		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	-Total-		Minus	**	=	X\$ 9=		OR	X\$18=	ا منطقه ما منطقه منطقه منطقه منطقه منطقه
	Independent	ATTANAN OF	Minus	***	=	X39=		OR	X78=	
	FIRST PRESE	NIAHUN OF	MULTIPLE DEI	PENDENT CLAIM		+130-		OR	+260=	
			:			TOT. ADDIV. FI			TOTAL	
	(Column 1) (Column 2) (Column 3)						:E	1	ADĎIT. FEE	70
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMEN		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE	, .	RATE	ADDI- TIONAL FEE
	Total .	*	Minus	**]=	X\$ 9=	:	OR	X\$18=	
	Independent	*	Minus	***	=	X39=		OR	X78=	
	FIRST PRESE	NTATION OF	MULTIPLE DEI	PENDENT CLAIM		+130=	_	1	+260=	
				•		TOT/		OR	TOTAL	
						ADDIT. FE		OR	ADDIT. FEE	
		(Column 1 CLAIMS		(Column 2) HIGHEST	(Column 3)			_		
AMENDMENT C	•	REMAINING AFTER AMENDMEN		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**	=	X\$ 9=		OR	X\$18=	
	Independent	•	Minus	***	=	X39=		OR	X78=	
Ë	FIRST PRESE	NTATION OF	MULTIPLE DEI	PENDENT CLAIM				On		
	If the entry in colu	mn 1 is lace tha	n the entry in colu	ımn 2 write "N" in ~	lumn 3	+130=		OR	+260=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Pr viously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.										

This Form is for INTERNAL PTO USE ONLY. It does NOT get mailed to the applicant.

NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

APPLICATION NUMBER: 666213

Total Fee Calculation

	Local Fee Calculation									
,	Fee Cast.	Total # Chorac	Number Eloza	· · · · · · · · · · · · · · · · · · ·	F	T				
,	+ Smitty			Sim ស៊ីកាលក្	La Estic	Tacat				
Basic Filing For	<u> 2017) 11</u>			•	4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	690°				
निवास Clayer: >20	201 (4)	73	. দ্র			95100				
(odependent Claim:>)	2011 (31)	11	. 8 .			62400				
Malt. Cop Claim Present	294 (4)4									
Surcharge	205, 105				•	1700				
English Translation	1]+1					1300				
TOTAL FEE CALCULA										
Total Filing Fees Due :		398.00			·					
Less Filling Fees Submi	ned -5 <u>/</u>					,				
BALANCE DUE	= 5 239	8 00								
Mames Washing +	SM xamination									

Ligure 7

FORM OIPE-RAM-01 (Rev. 12/97)